Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

#### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Gregory First name  Michael Middle name  Meyer Last name and Suffix (Sr., Jr., II, III)	James First name  Anthony Middle name  Cannini Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8123	xxx-xx-8906

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Case number (if known)

**Gregory Michael Meyer** 

James Anthony Cannini

Debtor 1 Debtor 2

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5. Where you live		120 E Crisafulli Road Merritt Island, FL 32953	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 1 Gregory Michael Notor 2 James Anthony Ca					Case number (if known)				
Por	t 2: Tell the Court About	Your Ponk	runtov Cr	200						
7.	The chapter of the	Check or	ne. (For a l	orief description of		11 U.S.C. § 342(b) for Individuals Filing for Ban	kruptcy			
	Bankruptcy Code you are choosing to file under									
		■ Chap								
		☐ Chap								
		☐ Chap								
		☐ Chap	ter 13							
8.	How you will pay the fee	abo ord	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	ek with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or o	or money			
					Iments. If you choose this option Official Form 103A).	on, sign and attach the Application for Individual	ls to Pay			
		☐ Ire	equest tha	at my fee be waiv	ed (You may request this option	n only if you are filing for Chapter 7. By law, a ju	idge may,			
						our income is less than 150% of the official pove in installments). If you choose this option, you m				
		the	Application	on to Have the Ch	apter 7 Filing Fee Waived (Office	cial Form 103B) and file it with your petition.				
9.	Have you filed for bankruptcy within the	No.								
	last 8 years?	☐ Yes.								
			District			Case number				
			District		When When	Case number Case number				
			District		vvnen	Case number				
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor			Relationship to you				
			District		When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
11.	Do you rent your residence?	■ No.	Go to	line 12.						
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	st you and do you want to stay in your residence	?			
				No. Go to line 12						
				Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it w	vith this			

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		Gregory Michael M James Anthony C			Case number (if known)
	_				
Part	3: R	leport About Any Bu	sinesses `	You Own as a Sole Proprie	etor
12.		ou a sole proprietor full- or part-time ess?	■ No.	Go to Part 4.	
			☐ Yes.	Name and location of bu	siness
	busine an indi separa as a co	proprietorship is a less you operate as ividual, and is not a late legal entity such orporation, rship, or LLC.		Name of business, if any	
	sole pr	have more than one roprietorship, use a late sheet and attach		Number, Street, City, Sta	ate & ZIP Code
		s petition.		Check the appropriate be	ox to describe your business:
				☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
				☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
				☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
				☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
				☐ None of the above	ve
13. Are you filing under  Chapter 11 of the  Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, fin 11 U.S.C. 1116(1)(B).					a small business debtor, you must attach your most recent balance sheet, statement of
	For a d	definition of small	No.	I am not filing under Cha	pter 11.
	busine	ess debtor, see 11 § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: R	eport if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	•	u own or have any	■ No.		
	allege of imn	rty that poses or is d to pose a threat ninent and	☐ Yes.	What is the hazard?	
	public Or do	fiable hazard to health or safety? you own any		If immediate attention is	
		rty that needs diate attention?		needed, why is it needed?	
	perisha livesto or a bu	ample, do you own able goods, or ck that must be fed, uilding that needs repairs?		Where is the property?	
					Number, Street, City, State & Zip Code

	С	ase	e 6:16-bk-06779-RAC Doc 1 Filed	d 10	)/14	4/16 Page 5 of 60
Debtoi Debtoi	0 ,					Case number (if known)
Part 5	Explain Your Efforts t	to Re	eceive a Briefing About Credit Counseling			
			out Debtor 1:			out Debtor 2 (Spouse Only in a Joint Case):
y b c	ell the court whether ou have received a riefing about credit ounseling.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate or completion.
re C	he law requires that you eceive a briefing about redit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
Y O C	ou file for bankruptcy. ou must truthfully check ne of the following hoices. If you cannot do o, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
If C	you file anyway, the court an dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
wil you cre	vill lose whatever filing fee rou paid, and your reditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you			with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			only for cause and is limited to a maximum of 15 days.  I am not required to receive a briefing about credit counseling because of:			I am not required to receive a briefing about credit counseling because of:
			☐ Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			☐ Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			<ul> <li>Active duty.</li> <li>I am currently on active military duty in a military combat zone.</li> </ul>			Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debi				Case	se number (if known)					
Part	6: Answer These Quest	ions for R	eporting Purposes							
16.	What kind of debts do you have?	16a.	16a. <b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."							
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you owe the	at are not consumer debts or	or business debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.						
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter 7. Do you are paid that funds will be available		empt property is excluded and administrative expense creditors?					
	administrative expenses are paid that funds will		■ No							
	be available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	<b>2</b> 5,001-50,000					
ower		□ 50-99		☐ 5001-10,000	50,001-100,000					
		☐ 100-1 ☐ 200-9		☐ 10,001-25,000	☐ More than100,000					
19.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10 million						
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio						
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 mil						
20.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10 million						
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio						
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 mil						
Part	7: Sign Below									
For	you	I have ex	ramined this petition, and I declare u	under penalty of perjury that the	the information provided is true and correct.					
					if eligible, under Chapter 7, 11,12, or 13 of title 11, ,, and I choose to proceed under Chapter 7.					
			rney represents me and I did not pa nt, I have obtained and read the notion		who is not an attorney to help me fill out this 842(b).					
		I request	relief in accordance with the chapte	er of title 11, United States Co	code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571.								
			gory Michael Meyer		s Anthony Cannini Anthony Cannini					
			y Michael Meyer e of Debtor 1		of Debtor 2					
		Executed	d on October 14, 2016	Executed o	on <b>October 14, 2016</b>					
			MM / DD / YYYY		MM / DD / YYYY					

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Debtor 1 Gregory Michael James Anthony (							
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ted States Code, and have e that I have delivered to the d	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)				
If you are not represented by an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.  /s/ Eric J. Enrique	s, certify that I have no know  Date	October 14, 2016				
	Signature of Attorney for Debtor  Eric J. Enrique  Printed name		MM / DD / YYYY				
	Enrique Law Firm Firm name						
	836 Executive Ln Rockledge, FL 32955 Number, Street, City, State & ZIP Code						
	Contact phone (321) 638-23009	Email address	E.Enrique@EnriqueLawFirm.com				
	Har number & State		<u> </u>				

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Fill	in this informa	ation to identify your	case.			
Der	otor 1	Gregory Michael First Name	Middle Name	Last Name		
Deb	otor 2	James Anthony (	Cannini			
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	kruptcy Court for the:	MIDDLE DISTRICT O	PF FLORIDA		
Cas	se number					
	nown)					Check if this is an
					а	mended filing
<u>Of</u>	ficial For	<u>m 106Sum</u>				
Su	mmary of	Your Assets	and Liabilities a	and Certain Statistical Information		12/15
info	rmation. Fill our original form	ut all of your schedul s, you must fill out a	es first; then complete	ole are filing together, both are equally responsible the information on this form. If you are filing amen eck the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						our assets
					Va	llue of what you own
1.	Schedule A/E	<b>3: Property</b> (Official Fo	orm 106A/B)		\$	189,740.00
						·
	1b. Copy line	62, Total personal pro	perty, from Schedule A/E	3	\$	2,625.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	192,365.00
Par	t 2: Summa	rize Your Liabilities				
					Yo	our liabilities
						nount you owe
2.			laims Secured by Proper mn A, Amount of claim, a	rty (Official Form 106D) at the bottom of the last page of Part 1 of Schedule D	\$	235,696.00
3.	Schedule E/F	: Creditors Who Have	Unsecured Claims (Offic	cial Form 106E/F)		
٥.				ims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	d claims) from line 6j of Schedule E/F	\$	188,380.00
				Your total liabilitie	s \$	424,076.00
Par	t 3: Summa	rize Your Income and	Expenses			
4.	Schedule I: Y	our Income (Official Fo	orm 106I)			
				ıle I	\$	3,514.86
5.		our Expenses (Official			\$	3,584.19
	Copy your mo	onthly expenses from I	ne 22c of Schedule J		Ψ	
Par	t 4: Answer	These Questions for	Administrative and Sta	atistical Records		
6.	•		er Chapters 7, 11, or 13 on this part of the form.	3? Check this box and submit this form to the court with y	our othe	er schedules.
	Yes					
7.	What kind of	debt do you have?				
				er debts are those "incurred by an individual primarily for 3-9g for statistical purposes. 28 U.S.C. § 159.	r a pers	onal, family, or
	□ Your de	hts are not primarily	consumer debts. You b	nave nothing to report on this part of the form. <i>Check th</i>	is hox a	and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

#### Case 6:16-bk-06779-RAC Doc 1 Filed 10/14/16 Page 9 of 60

Debtor 2	James Anthony Cannini	Case number (if known)	
	m the Statement of Your Current Monthly Income: Cop A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 4,867.79

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Gregory Michael Meyer

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	62,498.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	62,498.00

	Case 6:	Lb-DK-Ub <i>1 1</i>	'9-R <i>F</i>	AC Do	CI H	ilea 10/	14/16	Page	10 01 60		
Fill in this inform	ation to identify y	our case and th	nis filin	g:							
Debtor 1	Gregory Mich		e Name		Last Na	ame					
Debtor 2 (Spouse, if filing)	James Anthor		e Name		Last Na	ame					
United States Ban	kruptcy Court for th	e: MIDDLE D	ISTRIC	T OF FLOR	RIDA						
Case number											Check if this is an amended filing
O#:-:-!	400 A /D										
Official For <b>Schedul</b> e		perty									12/15
1. <b>Do you own or ha</b>	space is needed, attion.  Each Residence, Build ave any legal or equitable.	ach a separate sl	heet to t	this form. Or	n the top of	any addition	nal pages st In				
1.1  120 E Crisa  Street address, if	, , ,	otion	Wha	Duplex or	-	uilding		the amoun	it of any secure	d clair	or exemptions. Put ms on <i>Schedule D:</i> cured by Property.
Merritt Isla		32953-0000		Land	ired or mobi	le home		entire pro			rrent value of the tion you own?
City	State	ZIP Code	Who	Other has an inter	rest in the p	oroperty? Ch	neck one	Describe	ee simple, ten te), if known.		\$189,740.00 wnership interest by the entireties, or
Brevard					-						
County				At least on		otors and ano		(see in	k if this is com	nmuni	ty property
			prop	er informatio perty identific	cation num	ber:				alna	d h.,
				w.bcpao.i		ηπ single	татшу	nome (va	luation obt	aine	a by
	r value of the port ve attached for Pa our Vehicles										\$189,740.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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	ebtor 1 ebtor 2		regory Mic ames Antho	hael Meyer ony Cannini		Case	number (if known)		
3.	Cars, va	ans,	trucks, tract	ors, sport utility v	ehicles, motorcycles				
	□ No								
	■ Yes								
;	3.1 Mak	e:	Ford		Who has an interest in the property?	Check one			s or exemptions. Put slaims on Schedule D:
	Mod	lel:			Debtor 1 only				Secured by Property.
	Yea		2008		Debtor 2 only		Current value of t		Current value of the
			nate mileage: ormation:		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and ano	thor	entire property?	p	oortion you own?
	_		TYR44U18	PA01710	At least one of the debtors and and	uiei			
					☐ Check if this is community prope (see instructions)	erty	\$2,000	0.00	\$2,000.00
5	.pages	you	have attache		wn for all of your entries from Part 2 that number here				\$2,000.00
D	o you ov	vn o		egal or equitable in	nterest in any of the following items	?		<b>por</b> Do	rrent value of the rtion you own? not deduct secured ms or exemptions.
0.	Example No —	les: N			s, china, kitchenware				
				[\$50]; Patio: grill [\$20 Pool area: table	ofa [\$50], coffee table [\$10], wal p], e [\$10], chairs [\$50]; m: queen-sized bed [\$50], dress				
					ıll-size bed [\$50],				\$300.00
7.	■ No	les:∃ i			deo, stereo, and digital equipment; cor media players, games	nputers, printers,	scanners; music c	ollections	;; electronic devices
8.		les: A		figurines; paintings ons, memorabilia, co	, prints, or other artwork; books, picture ollectibles	es, or other art ob	jects; stamp, coin,	or baseb	pall card collections;
	_	Des	scribe						
9.	Example No	les: S	musical instru	graphic, exercise, a	nd other hobby equipment; bicycles, p	pool tables, golf clu	ubs, skis; canoes a	and kayal	ks; carpentry tools;
	☐ Yes.	Des	scribe						

Official Form 106A/B Schedule A/B: Property page 2

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	ebtor 1 ebtor 2	Gregory Mic James Antho			Case number	(if known)	
10.	■ No	oles: Pistols, rifles	s, shotgur	ns, ammunition, and	d related equipment		
11.	Clothes Examp		othes, fur	s, leather coats, des	signer wear, shoes, accessories		
			Every	day clothing and	l accessories	]	\$75.00
12.	□ No ´		welry, cos	stume jewelry, enga	ngement rings, wedding rings, heirloom jewelry, watches	s, gems, gc	ld, silver
			Misc o	ostume jewelry		]	\$100.00
	Examp  ■ No □ Yes.  Any oth □ No	rm animals bles: Dogs, cats, b Describe her personal and Give specific info	d housel	nold items you did 	not already list, including any health aids you did noon already list, including any health aids you did noon all phone [\$25]	not list	\$150.00
			video	COΠSOIC [ψ25], C	ompater [\$100], and cen phone [\$25]	J	Ψ130.00
15					Part 3, including any entries for pages you have atta	ched	\$625.00
Pa	rt 4: Des	scribe Your Financ	cial Asset	s			
Do	you ow	n or have any le	egal or e	quitable interest in	n any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.	■ No			-	ome, in a safe deposit box, and on hand when you file y	our petition	า
	Examp				ounts; certificates of deposit; shares in credit unions, br s with the same institution, list each.	okerage ho	ouses, and other similar
	□ No ■ Yes				Institution name:		
			17.1.	Checking	Bank of America acct: xxxx9200 Location: 15 E Merritt Exchange Cause Merritt Island	way,	\$0.00
			17.2.	Checking	Bank of America acct: xxxx9190 Location: 15 E Merritt Exchange Cause Merritt Island	way,	\$0.00

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 Debtor 2		Michael Me nthony Car		Case number (if known)	Case number (if known)				
		17.3.	Checking	Space Coast Credit Union acct: xxxx4080	\$0.00				
_Exan			ely traded stocks ent accounts with br	rokerage firms, money market accounts					
■ No □ Yes			Institution or issuer	name:					
	oublicly trade venture	ed stock and	interests in incorp	porated and unincorporated businesses, including an interest in	an LLC, partnership, and				
■ No									
☐ Yes	. Give specifi		about them me of entity:	% of ownership:					
Nego	otiable instrum	<i>ent</i> s include p	personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.					
	. Give specific	c information	about them						
			uer name:						
	ement or pena			403(b), thrift savings accounts, or other pension or profit-sharing plan	s				
■ No									
☐ Yes	. List each ac		ely. of account:	Institution name:					
Your		nused deposi	s you have made so	o that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies,	or others				
■ No □ Yes				Institution name or individual:					
			dic navment of mon	ey to you, either for life or for a number of years)					
■ No	inos (A contre	action a peno	aic payment of mon	ley to you, office for me of for a flumber of years)					
	i	Issuer nam	e and description.						
			n an account in a q and 529(b)(1).	qualified ABLE program, or under a qualified state tuition progra	m.				
■ No □ Yes	i	Institution r	name and descriptio	on. Separately file the records of any interests.11 U.S.C. § 521(c):					
25. <b>Trust</b> s	s, equitable c	or future inte	rests in property (d	other than anything listed in line 1), and rights or powers exercis	able for your benefit				
_	. Give specifi	c information	about them						
Exam	, ,, ,	,	,	nd other intellectual property eds from royalties and licensing agreements					
■ No □ Yes	. Give specifi	c information	about them						
			r general intangibl lusive licenses, coo	les perative association holdings, liquor licenses, professional licenses					
■ No □ Yes	. Give specifi	c information	about them						
Money or	r property ow	ved to you?			Current value of the portion you own? Do not deduct secured				

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

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	ebtor 1 ebtor 2		chael Meyer hony Cannini		Case number (if known)	
28.	Tax refu	unds owed to	vou			
	■ No					
	☐ Yes. (	Give specific in	formation about them, include	ding whether you already filed the	returns and the tax years	
	Family : Examp		r lump sum alimony, spousa	al support, child support, maintena	ance, divorce settlement, property	settlement
	☐ Yes. (	Give specific in	formation			
	Examp	les: Unpaid wa	one owes you ges, disability insurance pay npaid loans you made to so	yments, disability benefits, sick pa meone else	y, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific ir	nformation			
		t <b>s in insurance</b> les: Health, dis		alth savings account (HSA); credit	, homeowner's, or renter's insurar	nce
	☐ Yes. N	Name the insur	ance company of each polic Company name:	cy and list its value.	Beneficiary:	Surrender or refund value:
	If you a		rty that is due you from so ary of a living trust, expect p	omeone who has died proceeds from a life insurance poli	cy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific ir	nformation			
				u have filed a lawsuit or made a rance claims, or rights to sue	demand for payment	
	_	Describe each	claim			
34.	Other c	ontingent and	l unliquidated claims of ev	ery nature, including countercl	aims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each	claim			
	_ `	ancial assets	you did not already list			
	■ No □ Yes.	Give specific ir	nformation			
36			e of all of your entries from t number here	n Part 4, including any entries fo	or pages you have attached	\$0.00
Pa	rt 5: Des	cribe Any Busir	ness-Related Property You Ov	vn or Have an Interest In. List any re	eal estate in Part 1.	
	Do you o ■ No. Go	-	legal or equitable interest in a	any business-related property?		
_	_	o to line 38.				
Pa			- and Commercial Fishing-Rel n interest in farmland, list it in Pa	lated Property You Own or Have an art 1.	Interest In.	
46.	_ `		any legal or equitable inter	rest in any farm- or commercial	fishing-related property?	
	_	Go to Part 7.				
	☐ Yes.	Go to line 47.				
Do	rt 7:	Describe All D	roporty Voli Own or Hove on I	ntaract in That You Did Not List Abo	210	

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Debtor 2			Case number (if known)	
•	you have other property of any kind you did not already list?  amples: Season tickets, country club membership			
■ No	0			
□Y€	es. Give specific information			
54. <b>Ad</b>	ld the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b>	rt 1: Total real estate, line 2			\$189,740.00
56. <b>Pa</b>	rt 2: Total vehicles, line 5	\$2,000.00		
57. <b>Pa</b>	rt 3: Total personal and household items, line 15	\$625.00		
58. <b>Pa</b>	rt 4: Total financial assets, line 36	\$0.00		
59. <b>Pa</b>	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b>	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not listed, line 54 +	\$0.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$2,625.00	Copy personal property total	\$2,625.00
63. <b>To</b>	tal of all property on Schedule A/B. Add line 55 + line 62			\$192,365.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	<b>Gregory Micha</b>	el Meyer		
	First Name	Middle Name	Last Name	
Debtor 2	James Anthon	y Cannini		
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number				
Jase number				☐ Check if this is ar

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	120 E Crisafulli Road Merritt Island,	\$189,740.00		\$189,740.00	Fla. Const. art. X, § 4(a)(1);
	FL 32953 Brevard County 3 bdrm, 2 bth, 2208 sq ft single family home (valuation obtained by www.bcpao.us) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. §§ 222.01 & 222.02
	2008 Ford VIN: 1FTYR44U18PA01710	\$2,000.00		\$1,000.00	Fla. Stat. Ann. § 222.25(1)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2008 Ford VIN: 1FTYR44U18PA01710	\$2,000.00		\$1,000.00	Fla. Const. art. X, § 4(a)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Living room: sofa [\$50], coffee table [\$10], wall unit [\$10], 52" TV [\$50];	\$300.00		\$300.00	Fla. Const. art. X, § 4(a)(2)
	Patio: grill [\$20], Pool area: table [\$10], chairs [\$50]; Master bedroom: queen-sized bed [\$50], dresser [\$50], 52" TV [\$50]; Bedroom #3: full-size bed [\$50], Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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	otor 1 otor 2	Gregory Michael Meyer James Anthony Cannini			Case number (if known)		
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Check only one box for each exemption. Schedule A/B			Fla. Const. art. X, § 4(a)(2)  Fla. Const. art. X, § 4(a)(2)  Fla. Const. art. X, § 4(a)(2)	
		ryday clothing and accessories	\$75.00 <b>\$</b> \$75.00		\$75.00	Fla. Const. art. X, § 4(a)(2)	
	LINC	ioni denedale A/L. TTT			100% of fair market value, up to any applicable statutory limit		
	Misc costume jewelry Line from Schedule A/B: 12.1		\$100.00		\$100.00	Fla. Const. art. X, § 4(a)(2)	
	Line	TOTT Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
		o console [\$25], computer [\$100], cell phone [\$25]	\$150.00		\$150.00	Fla. Const. art. X, § 4(a)(2)	
		from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of more than \$160,375?  (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  No						
		Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case?		
		■ No					
		□ Yes					

Fill in this informa	tion to identify you	r case:			
Debtor 1	Gregory Michae				
Debior	First Name	Middle Name Last Name			
Debtor 2	James Anthony	Cannini			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number					
(if known)					if this is an led filing
					ica ming
Official Form	106D				
Schedule D	: Creditors	Who Have Claims Secure	d by Propert	V	12/15
Be as complete and a	ccurate as possible. I	f two married people are filing together, both are edut, number the entries, and attach it to this form. C	qually responsible for su	pplying correct informa	
1. Do any creditors ha	ve claims secured by	your property?			
□ No. Check th	nis box and submit th	nis form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in al	I of the information b	pelow.	-		
	Secured Claims	3500			
2. List all secured cla for each claim. If more	nims. If a creditor has not the than one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	y  Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Bank of Am	erica	Describe the property that secures the claim:	\$24,321.00	\$189,740.00	\$23,560.00
Creditor's Name		120 E Crisafulli Road Merritt Island, FL 32953 Brevard County 3 bdrm, 2 bth, 2208 sq ft single family home (valuation obtained by www.bcpao.us) As of the date you file, the claim is: Check all that			
PO Box 260 Greensboro		apply.			
-	ty, State & Zip Code	☐ Contingent ☐ Unliquidated			
Who owes the debt		☐ Disputed  Nature of lien. Check all that apply.			
_	r Check one.	_	acura d		
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or se car loan)	ecurea		
Debtor 1 and Debto		Statutory lien (such as tax lien, mechanic's lien)			
At least one of the Check if this claim		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ HELOC			
community debt  Date debt was incurr	11/07 - ed 8/29/16	Last 4 digits of account number 9199			
2.2 Bluegreen C	Corp	Describe the property that secures the claim:	\$22,396.00	\$0.00	\$22,396.00
Creditor's Name Attn: Mortga 4960 Confei 100	age Dept rence Wy N#	As of the date you file, the claim is: Check all that			
Boca Raton	, FL 33431	apply.  Contingent			
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or se car loan)	ecured		
■ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit			

Official Form 106D

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Debtor 1	Gregory M	lichael Meyer		Cas	e number (if know)		
	First Name	Middle N	ame Last Name				
Debtor 2	James Ant	thony Cannin	i				
	First Name	Middle N	ame Last Name	<del></del>			
	if this claim re nunity debt	lates to a	Other (including a right to offset)	Time Share Mo	ortgage		
Date debt	was incurred	05/13 - 8/22/16	Last 4 digits of account nu	mber <u>6151</u>			
2.3 <b>Na</b>	tionstar Mor	rtgage LLC	Describe the property that secures	s the claim:	\$188,979.00	\$189,740.00	\$0.00
Crec 899 BIV	ditor's Name  50 Cypress V	Waters	120 E Crisafulli Road Merri FL 32953 Brevard County 3 bdrm, 2 bth, 2208 sq ft si family home (valuation obt www.bcpao.us) As of the date you file, the claim is apply.  ☐ Contingent	ngle ained by			
Num	ber, Street, City, S	tate & Zip Code	☐ Unliquidated				
	,,,,	J	☐ Disputed				
Who owe	es the debt? C	heck one.	Nature of lien. Check all that apply				
■ Debtor □ Debtor	,		An agreement you made (such a car loan)	s mortgage or secured	I		
☐ Debtor	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At leas	t one of the deb	tors and another	☐ Judgment lien from a lawsuit	,			
	if this claim re nunity debt	lates to a	Other (including a right to offset)	Mortgage			
Date debt	was incurred	10/06 - 8/13/16	Last 4 digits of account nu	mber 9980			
If this is		of your form, add	Column A on this page. Write that nu the dollar value totals from all page		\$235,696. \$235,696.		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in Abin in										
	formation to identify your o									
Debtor 1	Gregory Michael I	Meyer Middle Name	Last Nam	Δ						
Debtor 2	James Anthony C		Last Ham	S						
(Spouse if, filing)	First Name	Middle Name	Last Nam	е						
United States	Bankruptcy Court for the:	MIDDLE DISTRI	CT OF FLORIDA							
Case number										
(if known)								-	if this is a led filing	n
Official Fo	orm 106E/F									
Schedule	E/F: Creditors W	ho Have Ur	secured Claim	S					12/1	5
any executory of Schedule G: Ex Schedule D: Cr left. Attach the name and case	e and accurate as possible. Use contracts or unexpired leases eccutory Contracts and Unexpired editors Who Have Claims Sect Continuation Page to this page number (if known).	that could result in red Leases (Officia ıred by Property. If e. If you have no inf	a claim. Also list executo I Form 106G). Do not inclu more space is needed, co	ry contraction in the contraction of the contractio	cts on Schedu editors with p rt you need, fi	ıle A/B: F partially s ill it out, ı	Property (O secured cla number the	fficial For ims that a e entries i	m 106A/B) are listed in n the boxe	and on n es on the
	editors have priority unsecured		u?							
□ No. Go	• •									
Yes.										
identify who possible, lis Part 1. If m	your priority unsecured claims at type of claim it is. If a claim ha st the claims in alphabetical orde ore than one creditor holds a pa planation of each type of claim, s	s both priority and no r according to the cre rticular claim, list the	onpriority amounts, list that one of the control of	claim here nore than to	and show both	n priority a ecured cla	nd nonprionalms, fill out	rity amoun	ts. As mucl nuation Pag Nonprior	h as ge of
2.1 Child	d Support Enforcement	Last 4	digits of account number	99G1		\$0.00	amount	\$0.00	amount	\$0.00
Priorit	y Creditor's Name			00/00	0/07/40					
_	Box 14 ny, NY 12201	When	was the debt incurred?	02/02 -	9/07/16		-			
	er Street City State Zlp Code	As of t	he date you file, the claim	is: Check	all that apply					
Who incu	urred the debt? Check one.	☐ Cor	tingent							
☐ Debto	r 1 only	☐ Unli	quidated							
■ Debto	r 2 only	☐ Disp	outed							
☐ Debto	r 1 and Debtor 2 only	Туре о	f PRIORITY unsecured cla	aim:						
☐ At leas	st one of the debtors and anothe	r 🔳 Dor	nestic support obligations							
☐ Check	k if this claim is for a commun	ity debt 🔲 Tax	es and certain other debts y	ou owe th	e government					
Is the cla	im subject to offset?	☐ Clai	ms for death or personal inj	ury while y	ou were intoxi	cated				
■ No		☐ Oth	er. Specify							
☐ Yes			Family Su	oport						
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Clai	ims							
3. Do any cre	editors have nonpriority unsec	ured claims agains	t you?							
☐ No. You	u have nothing to report in this pa	art. Submit this form	to the court with your other	schedules.						
Yes.										
unsecured	your nonpriority unsecured cla claim, list the creditor separately reditor holds a particular claim, li	for each claim. For	each claim listed, identify wl	nat type of	claim it is. Do	not list cla	aims alread	y included	in Part 1. It	f more

Total claim

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	or 1 Gregory Michael Meyer or 2 James Anthony Cannini	Case number (if know)					
4.1	Advanced Collection Bureau	Last 4 digits of account number 3898	\$2,339.00				
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 560063	When was the debt incurred? 05/14	¥=,====				
	Rockledge, FL 32956  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Collections - Health First Inc					
4.2	AMCA/Amer Medical Collection  Nonpriority Creditor's Name	Last 4 digits of account number 4551	\$249.00				
	4 Westchester Plaza Suite 110	When was the debt incurred?					
	Elmsford, NY 10523  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not</li> </ul>					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Collections - Quest Diagnostics					
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number 5546	\$3,190.00				
	Nc4-105-03-14 PO Box 26012	When was the debt incurred? 02/07 - 5/16/16					
	Greensboro, NC 27410  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card					

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	James Anthony Cannini		Case number (if know)	
4.4	Bank of America	Last 4 digits of account number	4751	\$574.00
	Nonpriority Creditor's Name Nc4-105-03-14 PO Box 26012	When was the debt incurred?	09/12 - 9/02/16	ψοσ
	Greensboro, NC 27410  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	
4.5	Bank of America	Last 4 digits of account number	9242	\$471.00
	Nonpriority Creditor's Name Nc4-105-03-14 PO Box 26012	When was the debt incurred?	11/14 - 9/03/16	
	Greensboro, NC 27410  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing		
	■ No	·		
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	9683	Unknown
	Nc4-105-03-14 PO Box 26012	When was the debt incurred?	10/06 - 5/31/13	
	Greensboro, NC 27410  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Real Estate	Mortgage	

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	Gregory Michael Meyer  James Anthony Cannini		Case number (if know)	
	Barclays Bank Delaware	Last 4 digits of account number	5673	\$4,926.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 8801	When was the debt incurred?	09/13 - 2/02/15	
_	Wilmington, DE 19899 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
	Belden/Sterling Jewelers	Last 4 digits of account number	6242	Unknown
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 1799	When was the debt incurred?	12/13 - 4/26/15	
	Akron, OH 44309  Number Street City State Zlp Code	As of the date you file, the claim i	s. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	<b>5.</b> Спеск ан тат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
	BMW Financial Services	Last 4 digits of account number	2529	\$28,461.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 3608	When was the debt incurred?	02/15 - 5/14/16	
	Dublin, OH 43016			
_	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify 2012 BMW	- repoed -	

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	Gregory Michael Meyer James Anthony Cannini		Case number (if know)	
4.1 0	BMW Financial Services	Last 4 digits of account number	3781	\$16,169.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 3608 Dublin, OH 43016	When was the debt incurred?	03/14 - 3/01/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Lease		
4.1 1	Bmw Financial Services	Last 4 digits of account number	7007	Unknown
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 3608	When was the debt incurred?	02/13 - 2/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Automobile	)	
4.1	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9421	\$2,737.00
	Attn: Bkc Dept PO Box 30285	When was the debt incurred?	01/15 - 6/06/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	

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Debto Debto	or 1 Gregory Michael Meyer or 2 James Anthony Cannini		Case number (if know)	
4.1	Citibank/The Home Depot	Last 4 digits of account number	7741	\$1,763.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 790040 S Louis, MO 63129	When was the debt incurred?	06/08 - 5/13/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed	l alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Citibank/The Home Depot	Last 4 digits of account number	9710	\$344.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 790040	When was the debt incurred?	04/05 - 8/05/16	
	S Louis, MO 63129  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	<u> </u>	_ '		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans	i Ciaiiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc		
4.1 5	ComenityCapital/Overst  Nonpriority Creditor's Name	Last 4 digits of account number	3906	\$898.00
	Attn: Bkc Dept PO Box 182125 Columbus, OH 43218	When was the debt incurred?	02/16 - 5/16/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Charge Acc	count	

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Debto Debto	r 1 Gregory Michael Meyer r 2 James Anthony Cannini		Case number (if know)	
4.1 6	Dept Of Ed/Navient	Last 4 digits of account number	1217	\$62,498.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 9400 Wilkes Barr, PA 18773	When was the debt incurred?	12/04 - 8/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ll	
4.1 7	Discover Financial  Nonpriority Creditor's Name	Last 4 digits of account number	8361	\$8,675.00
	Attn: Bkc Dept PO Box 3025	When was the debt incurred?	01/07 - 1/12/15	
	New Albany, OH 43054	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.1 8	Discover Financial	Last 4 digits of account number	7246	Unknown
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 3025	When was the debt incurred?	1/25/07 - 8/22/08	
	New Albany, OH 43054  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	

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or 2 James Anthony Cannini		Case number (if know)	
Discover Personal Loan	Last 4 digits of account number	0850	\$10,071.00
Nonpriority Creditor's Name Attn: Bkc Dept PO Box 30954 Salt Lake City, UT 84130	When was the debt incurred?	12/12 - 2/04/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Unsecured		
Fox Collection Center	Last 4 digits of account number	3272	\$0.00
Nonpriority Creditor's Name	_	<del></del>	
PO Box 528	When was the debt incurred?	01/14 - 11/21/14	
Goodlettsvile, TN 37070  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collections	s - Pathology Specialists PA	
Fox Collection Center  Nonpriority Creditor's Name	Last 4 digits of account number	3417	\$0.00
PO Box 528	When was the debt incurred?	01/14 - 11/21/14	
Goodlettsvile, TN 37070  Number Street City State Zlp Code	As of the date you file, the claim i	in Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	— O. H. o. C.	s - Pathology Specialists PA	

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	or 1 Gregory Michael Meyer or 2 James Anthony Cannini	Case number (if know)	
4.2 2	Gold Key Credit	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 15670 Brooksville, FL 34604	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections - Space Coast E P	
4.2 3	Gulf Coast Collection	Last 4 digits of account number	\$965.00
	Nonpriority Creditor's Name Attn: Bkc Dept 5630 Marquesas Circle Sarasota, FL 34233	When was the debt incurred? 10/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections - Space Coast Surgery Center	
4.2 4	MAF Collection Srvs Nonpriority Creditor's Name	Last 4 digits of account number 6746	\$175.00
	PO Box 2842 Tampa, FL 33601	When was the debt incurred? 10/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not</li></ul>	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections - Health First Physicians	

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James Anthony Cannini			
MAF Collection Srvs	Last 4 digits of account number	6930	\$134.00
Nonpriority Creditor's Name PO Box 2842	When was the debt incurred?	09/14	
Tampa, FL 33601	when was the dept incurred:	03/14	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collections	s - Health First Physicians	
Space Coast Credit Union	Last 4 digits of account number	8021	\$26,470.00
Nonpriority Creditor's Name 8045 N Wickham Rd	When was the debt incurred?	06/14 - 6/05/16	
Melbourne, FL 32940  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date you me, the claim.	or check an that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify 2011 BMW	- repoed	
Suntrustbank/gs Loan	Last Adiates of account months	1195	\$8.115.00
Nonpriority Creditor's Name	Last 4 digits of account number		ψο, 115.00
1797 NE Expressway	When was the debt incurred?	01/15 - 8/22/16	
Atlanta, GA 30329  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	в. Спеск ан так арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Unsecured		

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Debto Debto	r 1 Gregory Michael Meyer r 2 James Anthony Cannini			
4.2	Synchrony Bank/Amazon	Last 4 digits of account number	5634	\$670.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 965064 Orlando, FL 32896	When was the debt incurred?	01/14 - 8/01/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Synchrony Bank/Walmart	Last 4 digits of account number	0999	\$2,775.00
	Nonpriority Creditor's Name Attn: Bkc Dept PO Box 965064	When was the debt incurred?	12/09 - 6/09/16	
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.3	Teachers Fed Credit Un  Nonpriority Creditor's Name	Last 4 digits of account number	8400	\$2,650.00
	102 Motor Pkwy Hauppauge, NY 11788	When was the debt incurred?	05/04 - 5/20/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	· · · · · · · · · · · · · · · · · · ·	
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	

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Debtor 1 Debtor 2	Gregory Michael Meyer  James Anthony Cannini		Case number (if know)	
	Visa Dept Store Nat'l Bk	Last 4 digits of account number	9210	\$2,023.00
	Nonpriority Creditor's Name  Attn: Bkc Dept	When was the debt incurred?	03/05 - 7/07/16	
	PO Box 8053	When was the dest meaned.	03/03 - 1/01/10	
	Mason, OH 45040			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alains.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	ls the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Ac	count	
1- 1	Visa Dept Store Nat'l Bk Nonpriority Creditor's Name	Last 4 digits of account number	9911	\$1,038.00
	Attn: Bkc Dept	When was the debt incurred?	03/14 - 6/05/16	
	PO Box 8053			
	Mason, OH 45040  Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
1	s the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	Other. Specify Charge Ac	count	
Part 3:	List Others to Be Notified About a D	•		
is tryin have m	g to collect from you for a debt you owe to s	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	you already listed in Parts 1 or 2. For example n Parts 1 or 2, then list the collection agency had to a collection agency had to a collection agency had a collection agency had a collection and the collection are a collection.	ere. Similarly, if you
	d Address	On which entry in Part 1 or Part 2 did you		
Health	First S Hwy 1		Part 1: Creditors with Priority Unsecured Claims	
	dge, FL 32955		Part 2: Creditors with Nonpriority Unsecured Cl	aims
		Last 4 digits of account number		
	d Address	On which entry in Part 1 or Part 2 did you	_	
	First Physicians c 561600	_	Part 1: Creditors with Priority Unsecured Claims	
	dge, FL 32956-1600	•	Part 2: Creditors with Nonpriority Unsecured Cl	aims
	<b>35</b> , - 1 - 1 - 1 - 1 - 1	Last 4 digits of account number		
Name and	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	ogy Specialists		Part 1: Creditors with Priority Unsecured Claim	S
-	ellevue Avenue		Part 2: Creditors with Nonpriority Unsecured Cl	aims
Oriand	o, FL 32806	Last 4 digits of account number		
Name and	d Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

Official Form 106 E/F

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Debtor 1 Gregory Michael Meyer James Anthony Cannini		Case number (if know)
Pathology Specialists 1814 Bellevue Avenue	Line <b>4.21</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
Orlando, FL 32806	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Quest Diagnostics	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bkc Dept PO Box 4950 Southeastern, PA 19398		■ Part 2: Creditors with Nonpriority Unsecured Claims
ooding the roots	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Space Coast Surgery Center	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
595 N Courtenay Pkwy Ste 103 Merritt Island, FL 32953		■ Part 2: Creditors with Nonpriority Unsecured Claims
Merritt Island, I E 3233	Last 4 digits of account number	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 62,498.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 125,882.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 188,380.00

Fill in this infor	mation to identify your	case:				
Debtor 1	Gregory Michael Meyer					
	First Name	Middle Name	Last Name			
Debtor 2 James Anthony Cannini						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	FLORIDA			
Case number						
(if known)						

#### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for			
.1								
	Name				<del></del>			
	Number	Street			_			
	City		State	ZIP Code	<u> </u>			
.2								
	Name							
	Number	Street			<u> </u>			
	City		State	ZIP Code	<del>_</del>			
2.3								
	Name							
	Number	Street			_			
	City		State	ZIP Code	_			
.4	<u> </u>		<u> </u>	2 0000				
	Name				_			
	Number	Street			_			
	City		State	ZIP Code	<u> </u>			
2.5	/							
	Name				<del>_</del>			
	Number	Street			<u> </u>			
	City		State	ZIP Code	<u> </u>			

Official Form 106G

#### Case 6:16-bk-06779-RAC Doc 1 Filed 10/14/16 Page 34 of 60

Fill in this i	nformation to identify yo	our case:		
Debtor 1	Gregory Micha	nel Meyer		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	James Anthon First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for th	e: MIDDLE DISTRICT	OF FLORIDA	
Case numb	er			
(if known)				☐ Check if this is an amended filing
Official	Form 106H			
	ule H: Your Co	debtors		12/15
fill it out, an your name a	d number the entries in and case number (if kno	the boxes on the left. A wn). Answer every ques	ttach the Additional Page to this	more space is needed, copy the Additional Page, page. On the top of any Additional Pages, write codebtor.
■ No				
☐ Yes				
			ty property state or territory? (Co., Puerto Rico, Texas, Washington	ommunity property states and territories include, and Wisconsin.)
■ No. (	Go to line 3.			
		spouse, or legal equivaler	nt live with you at the time?	
in line : Form 1	2 again as a codebtor or	ly if that person is a gu	arantor or cosigner. Make sure y	r spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and	nd ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1			[	Schedule D, line
	ame			Schedule E/F, line
			[	Schedule G, line
	umber Street ity	State	ZIP Code	
3.2				Schedule D, line
	ame			Schedule E/F, line
				Schedule G, line
	umber Street			
С	ity	State	ZIP Code	

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						-				
	in this information to identify your c									
De	btor 1 Gregory Mic	chael Meyer								
1	btor 2 James Anth	ony Cannini								
Un	ited States Bankruptcy Court for the	: MIDDLE DISTRICT C	F FLORIDA							
Ca	se number					Check	c if this is:			
(If k	nown)		-			☐ Ar	n amende	d filing		
									ving postpetition e following date:	
0	fficial Form 106I					MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
atta	puse. If you are separated and you ch a separate sheet to this form.  Tt 1: Describe Employment  Fill in your employment									
١.	information.		Debtor 1				Debtor 2	or non	-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed				■ Employed			
		p.o,o o.u.uo	☐ Not employed				☐ Not employed			
	employers.	Occupation	Sales Manager				Customer Service Rep			
	Include part-time, seasonal, or self-employed work.	Employer's name	Масу							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? 16 moi	nths			_1	4 mon	ths	
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	space.	Include your nor	n-filing
	ou or your non-filing spouse have more space, attach a separate sheet to		ombine the information	on for all	empl	oyers for t	hat perso	n on the	e lines below. If y	you need
						For Deb	tor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,9	979.16	\$	1,983.67	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$_	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,97	9.16	\$	1,983.67	

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Gregory Michael Meyer James Anthony Cannini	-	Ca	ise numb	oer (if known)			
				F	or Deb	tor 1		Debtor 2 or n-filing spouse	
	Cop	by line 4 here	4.	9	<u> </u>	2,979.16	\$	1,983.67	
5.	List	all payroll deductions:							
-	5a.	Tax, Medicare, and Social Security deductions	5a.	9	}	304.18	\$	309.23	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_	0.00	
	5c.	Voluntary contributions for retirement plans	5c.			89.38	\$_	79.34	
	5d.	Required repayments of retirement fund loans	5d.	9	<u> </u>	0.00	\$	0.00	
	5e.	Insurance	5e.	9	5	168.32	\$	49.51	
	5f.	Domestic support obligations	5f.	9	5	0.00	\$	433.40	
	5g.	Union dues	5g.			0.00	\$	0.00	
	5h.	Other deductions. Specify: United Way	5h			4.00	_	0.00	
		Sp Life	_	9		0.00	\$_	1.73	
		TM ADD Life	_	9		0.00	\$	8.88	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		565.88	\$	882.09	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		2,413.28	\$	1,101.58	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.5				<b>c</b>	0.00	
	8b.	monthly net income.  Interest and dividends	8a. 8b.	9		0.00	\$_ \$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	9	5	0.00	\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8e. 8f.	9		0.00	\$ \$	0.00	
	8g.	Pension or retirement income	 8g.	9	5	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	+ \$	3	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_	0.00	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$	:	2 /1	3.28 + \$	1 1	101.58 = \$	3,514.86
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	_	۷,4۱	3.20 ·   ·	1,1	- Ψ	3,314.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	deper					Schedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies							3,514.86 ed
13.		you expect an increase or decrease within the year after you file this form	?					monthly	
		Yes. Explain:							

Fill	in this informa	ation to identify yo	our case:						
Deb	otor 1	Gregory Mic	hael Mev	er		Ch	neck if	this is:	
					-		An	amended filing	
	otor 2	James Antho	ony Canr	nini					wing postpetition chapter
(Spo	ouse, if filing)						13	expenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	: MIDDLE	E DISTRICT OF FLORIDA	Α		MN	I / DD / YYYY	
	e number								
(If k	nown)								
Of	fficial Fo	rm 106J							
S	chedule	J: Your l	Exper	ISAS					12/1
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people a ch another sheet to this					or supplying correct
Par	t 1: Desc Is this a join	ribe Your House	hold						
1.	□ No. Go to								
		s Debtor 2 live i	in a conar	ata hausahald?					
	_		iii a sepaid	ate nousenoid:					
	■ N	-	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	hold of De	ebtor 2	2.	
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents				Mother-In-Law	,		74	■ Yes
									□ No
					Father-In-Law			77	Yes
									□ No
									☐ Yes ☐ No
									□ No □ Yes
3.	Do your ex	penses include		No					<b>□</b> 163
		f people other the	han 👝	Yes					
	yourself an	d your depende	nts?	100					
		nate Your Ongoi							
exp		a date after the b		uptcy filing date unless y is filed. If this is a sup					apter 13 case to report f the form and fill in the
the	value of suc	h assistance an		government assistance cluded it on <i>Schedule I:</i>				.,	
(Of	ficial Form 10	D6I.)					_	Your exp	enses
4.		or home owners		ses for your residence. r lot.	Include first mortgage	4.	\$_		1,683.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner's	s, or renter	's insurance		4b.			0.00
			•	ıpkeep expenses		4c.	. –		125.00
_		eowner's associat				4d.			0.00
5.	Additional	mortgage payme	ents for yo	<b>our residence</b> , such as h	ome equity loans	5.	\$		92.19

Debtor 2	• • • • • • • • • • • • • • • • • • • •	Casa num	nber (if known)	
Debtor 2	James Androny Camillin	Case Hull	ibei (ii kilowii)	
6. <b>Ut</b> i	lities:			
6a	,, , , G	6a.	\$	0.00
6b	,, 9	6b.	\$	0.00
6c	,,,,	6c.	· -	0.00
6d		6d.	·	0.00
	od and housekeeping supplies	7.		668.00
	ildcare and children's education costs	8.	· -	0.00
	othing, laundry, and dry cleaning	9.	· •	140.00
	rsonal care products and services	10.	·	50.00
	dical and dental expenses	11.	\$	250.00
	Insportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	150.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.		· <del></del>	3.33
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	0.00
15	b. Health insurance	15b.	\$	0.00
15	c. Vehicle insurance	15c.	\$	276.00
15	d. Other insurance. Specify:	15d.	\$	0.00
	<b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	tallment or lease payments:	4-7	•	
	a. Car payments for Vehicle 1	17a.		0.00
	o. Car payments for Vehicle 2	17b.	· -	0.00
	c. Other. Specify:	17c.	· -	0.00
	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report a		\$	0.00
	ducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I) ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	Ψ	0.00
	ner real property expenses not included in lines 4 or 5 of this form or on Sci		our Income.	
	a. Mortgages on other property	20a.		0.00
	o. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Ot	ner: Specify:	21.	+\$	0.00
	· · -			
	Iculate your monthly expenses			. =
	a. Add lines 4 through 21.		\$	3,584.19
	p. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,584.19
3. <b>C</b> a	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,514.86
23	o. Copy your monthly expenses from line 22c above.	23b.	-\$	3,584.19
23	c. Subtract your monthly expenses from your monthly income.	00-	¢	-69.33
	The result is your monthly net income.	23c.	\$	-09.33
Foi	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?			e or decrease because of a
	No			
	Voc Evolain here:			

Fill in Alsia inf							
FIII IN THIS INTO	ormation to identity your	ease:					
Debtor 1							
Dobtor 2			Last	Name			
Debtor 2 (Spouse if, filing)	James Anthony C		Last	Name			
· · · · · · · · · · · · · · · · · · ·							
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF	F FLORIDA				
Case number							
(if known)						☐ Check if this is	s an
						amended filing	3
Official Fo	<u>rm 106Dec</u>						
Declara	ation About a	an Individua	I Debto	or's	Schedules		12/15
	First Name Middle Name Last Name    2   James Anthony Cannini   First Name   Middle Name   Last Name						
f two married	people are filing togethe	r, both are equally resp	onsible for su	upplying	g correct information.		
You must file t	this form whenever you fi	ile hankruntov schedule	es or amende	d sched	dules Making a false sta	tement concealing prope	erty or
years, or both	. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.					
c	ian Polow						
3	ign below						
Did you	nov or ograe to nov come	one who is NOT on otto	arnov to hola	vou fill	out bankruntov forma?		
Dia you	pay or agree to pay some	one who is NOT an atto	orney to neip	you iiii	out bankruptcy forms?		
■ No							
_							
☐ Yes	. Name of person						
					Deciaratio	in, and dignature (Omelai i	01111 1 1 3)
		that I have read the sur	mmary and so	chedule	s filed with this declarat	ion and	
that they	are true and correct.						
X /s/ G	regory Michael Meyer		X	/s/ Jar	nes Anthony Cannini		
Signa	ature of Debtor 1			Signatu	ure of Debtor 2		
Date	October 14, 2016			Date	October 14, 2016		
Date	OCIODEI 14, 2010			Julio .	OCIODE: 14, 2010		

Fill	l in this inform	ation to identify you	case:				
De	btor 1	Gregory Michael	Meyer				
_		First Name	Middle Na	me	Last Name		
	btor 2 ouse if, filing)	James Anthony First Name	Cannini Middle Na	me	Last Name		
Un	ited States Bar	kruptcy Court for the:	MIDDLE DIS	TRICT OF FLO	ORIDA		
	se number nown)			-		_	heck if this is an mended filing
Of	ficial For	m 107					
			Affairs fo	r Individu	uals Filing for E	Bankruptcy	4/16
info	rmation. If m		attach a separa			equally responsible for sup y additional pages, write you	
	<u> </u>	etails About Your Ma		l Where You L	ived Before		
1.	What is your	current marital statu	s?				
	■ Married □ Not marr	ried					
2.	During the la	st 3 years, have you	lived anywhere	other than wh	nere you live now?		
	■ No □ Yes. List	all of the places you l	ved in the last 3	years. Do not i	include where you live nov	ν.	
	Debtor 1 Pri	or Address:		es Debtor 1 d there	Debtor 2 Prior Ad	idress:	Dates Debtor 2 lived there
<b>3.</b> stat						nity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your C	Codebtors (Offic	sial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income				
·u	Explain	Time Courses or Tou	moonic				
4.	Fill in the tota	I amount of income yo	received from	all jobs and all	a business during this y businesses, including part ogether, list it only once u		ndar years?
	□ No						
	Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of inc Check all that a		Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, conbonuses, tips	Wages, commissions, sonuses, tips \$25,022.63		■ Wages, commissions, bonuses, tips	\$17,321.48
			☐ Operating a	business		☐ Operating a business	

Official Form 107

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		egory Mich mes Antho				Cas	se number (if known)			
				Debtor 1			Dobtor 2			
				Sources of income Check all that apply.	(befo	es income are deductions and asions)	Sources of inc		Gross income (before deductions and exclusions)	
			■ Wages, commissions, bonuses, tips		\$25,818.00	■ Wages, conbonuses, tips	nmissions,	\$69,443.00		
				☐ Operating a business			Operating a	business		
		dar year befo December 3		■ Wages, commissions, bonuses, tips		\$68,887.00	■ Wages, commissions, bonuses, tips \$87,356			
				☐ Operating a business			☐ Operating a business			
	■ No	source and th		me from each source separa	ately. Do	not include income	that you listed in lii	ne 4.		
				Debtor 1			Debtor 2			
				Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pay	ments You	Made Before You Filed for	Bankru	otcy				
6.	Are eithe ☐ No.	Neither De	btor 1 nor D	s debts primarily consume bebtor 2 has primarily consi personal, family, or househo	umer de	bts. Consumer deb	ts are defined in 11	U.S.C. § 10	11(8) as "incurred by an	
		□ No. □ Yes	Go to line 7 List below e paid that cre not include	re you filed for bankruptcy, d . each creditor to whom you pa editor. Do not include payme payments to an attorney for t t on 4/01/19 and every 3 year	id a total nts for do this bank	of \$6,425* or more omestic support obli- ruptcy case.	in one or more pa gations, such as cl	yments and t	and alimony. Also, do	
	■ Yes.			r both have primarily consure you filed for bankruptcy, d			al of \$600 or more	?		
		□ No.	Go to line 7							
		■ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.						
	Creditor	's Name and	Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for	
	8950 Cy	star Mortga ypress Wat I, TX 75019		8/16, 9/16, & 1	10/16	\$5,049.00	\$188,979.00		Card Repayment Pers or vendors	

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	James Anthony Cannini		Cas	se number (if known)	-				
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for				
	Bank of America Nc4-102-03-14 PO Box 26012 Greensboro, NC 27410	8/16, 9/16, & 10/16	\$276.00	\$24,321.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other				
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	No								
	Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment				
	insider 5 Name and Address	Dates of payment	paid	still owe	Reason for this payment				
	<ul> <li>■ No</li> <li>□ Yes. List all payments to an insider</li> </ul>								
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment				
Day			Total amount paid	Amount you still owe	Reason for this payment Include creditor's name				
Par	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include creditor's name ative proceeding?				
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	ns, and Foreclosures  cy, were you a party in an  cases, small claims action	paid  ny lawsuit, court ac s, divorces, collectic	still owe	Include creditor's name  ative proceeding? ctions, support or custody				
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include creditor's name ative proceeding?				
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title	ns, and Foreclosures  cy, were you a party in an cases, small claims action  Nature of the case  cy, was any of your prop	paid  ny lawsuit, court ac s, divorces, collectic  Court or agency	still owe	Include creditor's name  ative proceeding? ctions, support or custody  Status of the case				
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Within 1 year before you filed for bankrupt	ns, and Foreclosures  cy, were you a party in an cases, small claims action  Nature of the case  cy, was any of your prop	paid  ny lawsuit, court ac s, divorces, collectic  Court or agency	still owe	Include creditor's name  ative proceeding? ctions, support or custody  Status of the case				
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.	ns, and Foreclosures  cy, were you a party in an cases, small claims action  Nature of the case  cy, was any of your prop  w.  Describe the Property	paid  ny lawsuit, court ac s, divorces, collectic  Court or agency erty repossessed, f	still owe	Include creditor's name  ative proceeding? ctions, support or custody  Status of the case				
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11. Yes. Fill in the information below.	ns, and Foreclosures  cy, were you a party in an cases, small claims action  Nature of the case  cy, was any of your proporty  Describe the Property  Explain what happene 2012 BMW  Property was reposse	paid  ny lawsuit, court ac s, divorces, collectic  Court or agency erty repossessed, f	still owe	Include creditor's name  ative proceeding? ctions, support or custody  Status of the case shed, attached, seized, or levied?  Value of the				
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address  BMW Financial Srvcs Attn: Bkc Dept PO Box 3608	Nature of the case  cy, was any of your prop  Describe the Property  Explain what happene	paid  ny lawsuit, court ac s, divorces, collectic  Court or agency erty repossessed, for the court of the cou	still owe	ative proceeding? ctions, support or custody  Status of the case shed, attached, seized, or levied?  Value of the property				

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Debto Debto	0 ,		Case num	nber (if known)					
C	Creditor Name and Address	De	scribe the Property	Date	Value of the property				
		Ex	plain what happened		, ,,,				
	BMW Financial Srvcs Attn: Bkc Dept	20	11 BMW	9/16	\$16,169.00				
	O Box 3608		Property was repossessed.						
0	Oublin, OH 43016		Property was foreclosed.						
			Property was garnished.						
		_							
_			Property was attached, seized or levied.						
ac	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	No								
	Yes. Fill in the details.								
C	creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount				
cc □ □ Part 5			er official?						
3. <b>W</b> ■	No	ruptcy, o	did you give any gifts with a total value of mo	ore than \$600 per person	?				
		.00	Describe the mifts	Datas way ways	Value				
	ifts with a total value of more than \$6 er person	000	Describe the gifts	Dates you gave the gifts	Value				
	erson to Whom You Gave the Gift and address:	d							
4. <b>W</b>	ithin 2 years before you filed for bank	ruptcy, o	did you give any gifts or contributions with a	total value of more than	\$600 to any charity?				
_		00 mtribt	ion						
	ifts or contributions to charities that	total	Describe what you contributed	Dates you	Value				
	nore than \$600			contributed					
	Charity's Name Address (Number, Street, City, State and ZIP Co	da)							
	idar 555 (rambor, Sheet, Shy, State and En	uc,							
Part 6	List Certain Losses								
	ithin 1 year before you filed for bankr gambling?	uptcy or	since you filed for bankruptcy, did you lose	anything because of the	ft, fire, other disaster,				
	l <sub>No</sub>								
	Too. Till III tilo dotallo.								
	Describe the property you lost and ow the loss occurred	Descri	be any insurance coverage for the loss	Date of your	Value of property				
n	ow the 1055 occurred		e the amount that insurance has paid. List pendince claims on line 33 of Schedule A/B: Property.		lost				

Debtor 1 Gregory Michael Meyer James Anthony Cannini

Case number (if known)

Par	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep	paring a bankruptcy per	ition?			rty to anyone you		
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	alue of any propei	rty	Date payment or transfer was made	Amount of payment		
	Enrique Law Firm 836 Executive Ln Ste 120 Rockledge, FL 32955 e.enrique@enriquelawfirm.com	Attorney Fees ( (\$53) and Filing	\$900), Credit Re Fee (\$335)	port	8/16	\$1,288.00		
<ul> <li>Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors?         <ul> <li>Do not include any payment or transfer that you listed on line 16.</li> </ul> </li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						rty to anyone who		
	Person Who Was Paid Address	Description and values	Description and value of any property transferred			Amount of payment		
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you		property transferred paym		ny property or received or debts hange	Date transfer was made		
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a sel	f-settled tru	st or similar device	of which you are a		
	Name of trust	Description and v	Description and value of the property transferred			Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Inc	struments, Safe Deposi	Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated in the second secon	or other financial accou	nts; certificates of					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			e account was sed, sold, ved, or nsferred	Last balance before closing or transfer		

		egory Michael Meyer mes Anthony Cannini		Case number (if known)	
21.	Do you no cash, or o	ow have, or did you have within 1 year ther valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposite	ory for securities,
	■ No				
		Fill in the details.	1411	5 " "	5 (11)
		Financial Institution (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you	stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy	?
	■ No				
		Fill in the details.	NAMES OF THE PROPERTY OF THE P	Daniella di carattanta	D
		Storage Facility (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Ider	ntify Property You Hold or Control for S	Someone Else		
23.	Do you ho for some	old or control any property that someon one.	ne else owns? Include any propert	y you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes.	Fill in the details.			
	Owner's Address	Name (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give	e Details About Environmental Informa	tion		
For t	the purpos	e of Part 10, the following definitions a	apply:		
	toxic subs	ental law means any federal, state, or l stances, wastes, or material into the ain as controlling the cleanup of these sub	r, land, soil, surface water, ground	<u> </u>	
		s any location, facility, or property as operate, or utilize it, including disposal s		aw, whether you now own, operate,	or utilize it or used
		s <i>material</i> means anything an environn s material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,
Rep	ort all noti	ces, releases, and proceedings that yo	u know about, regardless of when	they occurred.	
24.	Has any g	overnmental unit notified you that you	may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No				
	☐ Yes.	Fill in the details.			
	Name of Address	Site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you	notified any governmental unit of any i	release of hazardous material?		
	■ No □ Yes.	Fill in the details.			
	Name of Address	Site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

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	btor 1 btor 2	Gregory Michael Meyer James Anthony Cannini		Case number (if known)	
26.	Have	you been a party in any judicial or ad	Iministrative proceeding under any	y environmental law? Include settlements and orders.	
		No			
		Yes. Fill in the details.			
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of case	the
Pai	rt 11:	Give Details About Your Business or	r Connections to Any Business		
27.	With	in 4 years before you filed for bankrup	otcy, did you own a business or ha	ave any of the following connections to any business?	
		☐ A sole proprietor or self-employed	in a trade, profession, or other ac	ctivity, either full-time or part-time	
		☐ A member of a limited liability com	pany (LLC) or limited liability parti	tnership (LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing e	xecutive of a corporation		
		☐ An owner of at least 5% of the voti	ng or equity securities of a corpor	ration	
		No. None of the above applies. Go to	Part 12.		
		Yes. Check all that apply above and fi	II in the details below for each bus	siness.	
		iness Name	Describe the nature of the busin		
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkee	Do not include Social Security number or l'	ΓIN.
				Dates business existed	
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	otcy, did you give a financial stater	ement to anyone about your business? Include all financ	cial
	_	No			
		Yes. Fill in the details below.			
		1 <b>e</b> I <b>ress</b> ber, Street, City, State and ZIP Code)	Date Issued		
Pai	rt 12:	Sign Below			
are with	true a 1 a bai		a false statement, concealing prop	nts, and I declare under penalty of perjury that the answ perty, or obtaining money or property by fraud in conne p to 20 years, or both.	
		ory Michael Meyer	/s/ James Anthony C		
		/ Michael Meyer e of Debtor 1	James Anthony Can Signature of Debtor 2	nini	
Dat	te O	ectober 14, 2016	Date October 14, 2	2016	
Did	you a	,		duals Filing for Bankruptcy (Official Form 107)?	
■ N					
		ay or agree to pay someone who is no	ot an attorney to help you fill out b	pankruptcy forms?	
┙	res. N	ame of Person Attach the <i>Bankr</i>	ruptcy Petition Preparer's Notice, Dec	claration, and Signature (Official Form 119).	

	Ousc 0.1	0 51 001 10 10		age 47 01 00
Fill in this infor	mation to identify yo	ur case:		
Debtor 1	Gregory Micha	el Meyer Middle Name	Last Name	
Debtor 2	James Anthon		Lastitatio	
(Spouse if, filing)	First Name	Middle Name	Last Name	—
United States B	ankruptcy Court for the	e: MIDDLE DISTRIC	CT OF FLORIDA	
O'mod Otatoo B	annapies Court for an			_
Case number (if known)				☐ Check if this is an amended filing
Official Fo	rm 100			
				. <u> </u>
Stateme	nt of Intenti	ion for Indiv	/iduals Filing Under Ch	apter 7 12/15
creditors have lea	e claims secured by sed personal propert	y and the lease has n		date set for the meeting of creditors
	ever is earlier, unless		e time for cause. You must also send copie	
	eople are filing toget nd date the form.	her in a joint case, bo	oth are equally responsible for supplying co	rrect information. Both debtors must
	and accurate as pos our name and case		s needed, attach a separate sheet to this for	rm. On the top of any additional pages,
Part 1: List Y	our Creditors Who H	ave Secured Claims		
For any credi information b	•	Part 1 of Schedule D	D: Creditors Who Have Claims Secured by P	roperty (Official Form 106D), fill in the
Identify the c	reditor and the proper	y that is collateral	What do you intend to do with the prope secures a debt?	rty that Did you claim the property as exempt on Schedule C?
Creditor's	Bank of America		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	

Creditor's Bluegreen Corp

County

name:

Description of Time Shared Loan

**Nationstar Mortgage LLC** 

120 E Crisafulli Road Merritt

3 bdrm, 2 bth, 2208 sq ft single family home (valuation obtained

Island, FL 32953 Brevard

by www.bcpao.us)

property securing debt:

Description of

securing debt:

property

Surrender the property.

☐ Retain the property and redeem it.☐ Retain the property and enter into a

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Surrender the property.☐ Retain the property and redeem it.

Retain the property and enter into a

□No

Yes

Yes

■ No

☐ Yes

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Creditor's

name:

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Debto Debto		gory Michael Meyer es Anthony Cannini			Case number (if know	n)	
pro	scription of operty curing debt:	120 E Crisafulli Road Merritt Island, FL 32953 Brevard County 3 bdrm, 2 bth, 2208 sq ft single family home (valuation obtained by www.bcpao.us)			Agreement. erty and [explain]:		
n the	ny unexpire informatio	our Unexpired Personal Property Leases ed personal property lease that you listed in below. Do not list real estate leases. Un e an unexpired personal property lease if	expired leases a	re le	eases that are still in effect; t	he le	
Desc	ribe your u	nexpired personal property leases				W	ill the lease be assumed?
	or's name: ription of lea	ased					No Yes
Lesso	or's name:						l No
Desci Prope	ription of lea erty:	ased					Yes
	or's name: ription of lea erty:	ased					No Yes
	or's name: ription of lea	ased					No
Prope	•						Yes
	or's name: ription of lea	ased					No
Порс	orty.					Ш	Yes
	or's name: ription of lea	ased					No
Prope	erty:						Yes
	or's name: ription of lea	ased					No
Prope	•						Yes
	penalty of	Below f perjury, I declare that I have indicated my subject to an unexpired lease.	/ intention abou	t any	y property of my estate that s	ecur	es a debt and any personal
_		ry Michael Meyer Michael Meyer	X		James Anthony Cannini mes Anthony Cannini		
	Signature o	5		Sigr	nature of Debtor 2		
ı	Date C	October 14, 2016	Da	te	October 14, 2016		

Official Form 108

		mation to identify your case:		Check	one box only as o	directed	in this form and	in Form
Deb	otor 1	Gregory Michael Meyer			очьр.			
	otor 2 use, if filing)	James Anthony Cannini		<b>1</b> .	. There is no pres	sumptio	n of abuse	
Unit	ed States E	Bankruptcy Court for the: Middle District of	Florida	<b>2</b> .	The calculation applies will be racalculation (Of	made ui	nder <i>Chapter 7 N</i>	•
(if kn	se number own)			□ 3.	The Means Test qualified militar		not apply now be e but it could ap	
					Check if this is a	an ame	ended filina	
Of	ficial F	orm 122A - 1					3	
		7 Statement of Your Cu	rrent Monthly In	con	ne			12/15
attac case quali	h a separate number (if I fying militar	and accurate as possible. If two married people is sheet to this form. Include the line number to known). If you believe that you are exempted from y service, complete and file Statement of Exemple to the line of the line	which the additional information om a presumption of abuse bed	n applicause ye	es. On the top of a ou do not have pri	ny addit marily c	tional pages, write onsumer debts or	e your name and r because of
Par		Iculate Your Current Monthly Income						
1.	-	our marital and filing status? Check one o	nly.					
		arried. Fill out Column A, lines 2-11.						
	Marrie	d and your spouse is filing with you. Fill o	out both Columns A and B, lin	es 2-11	l.			
	☐ Marrie	d and your spouse is NOT filing with you.	You and your spouse are:					
	Livi	ng in the same household and are not leg	ally separated. Fill out both	Columr	ns A and B, lines	2-11.		
	per	ng separately or are legally separated. Fill alty of perjury that you and your spouse are ng apart for reasons that do not include evadi	legally separated under nonb	ankrup	tcy law that appli	es or th		
1 th	01(10A). For ne 6 months,	erage monthly income that you received from all example, if you are filing on September 15, the 6-radd the income for all 6 months and divide the total the same rental property, put the income from that	month period would be March 1 that by 6. Fill in the result. Do not inc	rough A clude an	august 31. If the am y income amount m	ount of y nore thar	our monthly incom n once. For exampl	e varied during le, if both
					umn A otor 1	Debt	mn B tor 2 or filing spouse	
2.	Your gros	ss wages, salary, tips, bonuses, overtime, ductions).	and commissions (before a	all \$_	2,941.63	\$	1,926.16	
3.	•	and maintenance payments. Do not include is filled in.	e payments from a spouse if	\$_	0.00	\$	0.00	
4.	of you or from an un and room	nts from any source which are regularly p your dependents, including child suppor nmarried partner, members of your househol mates. Include regular contributions from a s o not include payments you listed on line 3.	<ul> <li>Include regular contribution d, your dependents, parents,</li> </ul>	S	0.00	\$	0.00	
5.	Net incor	ne from operating a business, profession						
	0	sints (hafana all da dust's sa)	Debtor 1 \$ 0.00					
		eipts (before all deductions) and necessary operating expenses	-\$ 0.00					
1								

Official Form 122A-1

Debtor 1 0.00

0.00 Copy here -> \$

0.00

\$ **-**\$ 0.00 Copy here -> \$

0.00

0.00

0.00

\$

Net monthly income from a business, profession, or farm \$

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

0.00

0.00

0.00

Total current month income  Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11	otor 1 otor 2	Gregory Micha James Anthon				Case num	ber ( <i>if known</i> )			
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you  \$ 0.00 For your spouse \$ 0.00 Pension or retrement income. Do not include any amount received that was a benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount.  Do not include any benefits received under the Social Security Act or payments received as a rich and other sources not listed above. Specify the source and amount.  Do not include any benefits received under the Social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and so the social Security Act or payments received as a rich and social Security Act or payments received as a rich and social Security Act or payments and social Security Act or payments received as a rich and social Security Act or payments received as a rich and social Security Act or payments received as a rich and social Security Act or payments received as a rich and social Security Act or payments and security or payments received as a social security Act or payments received as a social security Act or payments received and security Act or								Debtor 2	or	
the Social Security Act. Instead, list it here: For you spouse \$ 0.00 For your spouse \$ 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount. The Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  Copy line 11 heres>  Calculate your current monthly income for the year. Follow these steps:  12b. The result is your annual income for this part of the form  12b. The result is your annual income for this part of the form  12c. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This is thany also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.  Signature of Debtor 2  Date October 14, 2016  MM/DD / YYYYY	Une	employment comp	ensation			\$	0.00	\$	0.00	
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income from all other sources not listed above. Specify the source and amount.  Income specific and				amount received was a b	enefit und	ler				
Pension or retirement income. Do not include any amount received that was a sundanger of the Social Security He Social Security Act.  Income from all other sources not listed above. Specify the source and amounts received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$ 0.00  Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your total current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income for the year. Follow these steps:  12b. The result is your annual income for this part of the form  12b. The result is your annual income for this part of the form  12c. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  FL  Fill in the median family income for your state and size of household.  FIll in the median family income for you state and size of household.  FIll in the median family income for you prove that applies to you. Follow these steps:  FILL in the state in which you live.  FL  FILL in the incompare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3 and fill out Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  X /s/ James Anthony Cannini Signature of Debtor 1  Date October 14, 2016  MM/DD / YYYYY					0.00					
Pension or retirement income. Do not include any amount received that was a sundanger of the Social Security He Social Security Act.  Income from all other sources not listed above. Specify the source and amounts received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$ 0.00  Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your total current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income for the year. Follow these steps:  12b. The result is your annual income for this part of the form  12b. The result is your annual income for this part of the form  12c. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  FL  Fill in the median family income for your state and size of household.  FIll in the median family income for you state and size of household.  FIll in the median family income for you prove that applies to you. Follow these steps:  FILL in the state in which you live.  FL  FILL in the incompare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3 and fill out Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  X /s/ James Anthony Cannini Signature of Debtor 1  Date October 14, 2016  MM/DD / YYYYY	F	or your spouse		\$	0.00					
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Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  Copy line 11 here=>  \$ 4,867.75  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  12b. \$ 58,413.45  Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  FL  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.  14b.					or \$_	2,941.63	+ _	1,926.16	= \$_	4,867.79
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X /s/ Gregory Michael Meyer Gregory Michael Meyer Signature of Debtor 1  Date October 14, 2016 MM / DD / YYYYY  X /s/ James Anthony Cannini James Anthony Cannini Signature of Debtor 2  Date October 14, 2016 MM / DD / YYYYY	t 3:	Sign Below								
Gregory Michael Meyer Signature of Debtor 1  Date October 14, 2016 MM / DD / YYYY  James Anthony Cannini Signature of Debtor 2  Date October 14, 2016 MM / DD / YYYYY		By signing here, I	declare under penalty of	perjury that the informati	on on this	statement an	d in any at	tachments is	true and o	correct.
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	Da			Da			6			
					MM / I	DD / YYYY				
		If you checked line	e 14b, fill out Form 122A-2	2 and file it with this form	١.					

Debtor 1 Debtor 2	James Anthony Cannini	Case number (if known)	
Dalata a 4	Gregory Michael Meyer		

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period **04/01/2016** to **09/30/2016**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Macy's

Constant income of \$2,941.63 per month.

# Case 6:16-bk-06779-RAC Doc 1 Filed 10/14/16 Page 52 of 60

Debtor 1	Gregory Michael Meyer		
Debtor 2	James Anthony Cannini	Case number (if known)	

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 04/01/2016 to 09/30/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Banfield Pet

Constant income of \$1,926.16 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# United States Bankruptcy Court Middle District of Florida

In re	James Anthony Cannini		Case No.	
		Debtor(s)	Chapter	7
	VERIFICAT	TION OF CREDITOR MA	TRIX	
The abo	ove-named Debtors hereby verify that the attac	ched list of creditors is true and correct	to the best of	of their knowledge.
Date:	October 14, 2016	/s/ Gregory Michael Meyer		
		Gregory Michael Meyer		
		Signature of Debtor		
Date:	October 14, 2016	/s/ James Anthony Cannini		
		James Anthony Cannini		
		Signature of Debtor		

**Gregory Michael Meyer** 

Gregory Michael Meyer 120 E Crisafulli Road Merritt Island, FL 32953 Bluegreen Corp Attn: Mortgage Dept 4960 Conference Wy N # 100 Boca Raton, FL 33431 Fox Collection Center PO Box 528 Goodlettsvile, TN 37070

James Anthony Cannini 120 E Crisafulli Road Merritt Island, FL 32953

BMW Financial Services Attn: Bkc Dept PO Box 3608 Dublin, OH 43016 Gold Key Credit Attn: Bankruptcy PO Box 15670 Brooksville, FL 34604

Eric J. Enrique Enrique Law Firm 836 Executive Ln Rockledge, FL 32955 Capital One Attn: Bkc Dept PO Box 30285 Salt Lake City, UT 84130 Gulf Coast Collection Attn: Bkc Dept 5630 Marquesas Circle Sarasota, FL 34233

Advanced Collection Bureau Attn: Bkc Dept PO Box 560063 Rockledge, FL 32956 Child Support Enforcement PO Box 14 Albany, NY 12201 Health First 6450 US Hwy 1 Rockledge, FL 32955

AMCA/Amer Medical Collection 4 Westchester Plaza Suite 110 Elmsford, NY 10523 Citibank/The Home Depot Attn: Bkc Dept PO Box 790040 S Louis, MO 63129 Health First Physicians PO Box 561600 Rockledge, FL 32956-1600

Bank of America Nc4-102-03-14 PO Box 26012 Greensboro, NC 27410 ComenityCapital/Overst Attn: Bkc Dept PO Box 182125 Columbus, OH 43218 MAF Collection Srvs PO Box 2842 Tampa, FL 33601

Bank of America Nc4-105-03-14 PO Box 26012 Greensboro, NC 27410 Dept Of Ed/Navient Attn: Bkc Dept PO Box 9400 Wilkes Barr, PA 18773 Nationstar Mortgage LLC 8950 Cypress Waters Blvd Coppell, TX 75019

Barclays Bank Delaware Attn: Bkc Dept PO Box 8801 Wilmington, DE 19899 Discover Financial Attn: Bkc Dept PO Box 3025 New Albany, OH 43054 Pathology Specialists 1814 Bellevue Avenue Orlando, FL 32806

Belden/Sterling Jewelers Attn: Bkc Dept PO Box 1799 Akron, OH 44309 Discover Personal Loan Attn: Bkc Dept PO Box 30954 Salt Lake City, UT 84130 Quest Diagnostics Attn: Bkc Dept PO Box 4950 Southeastern, PA 19398 Space Coast Credit Union 8045 N Wickham Rd Melbourne, FL 32940

Space Coast Surgery Center 595 N Courtenay Pkwy Ste 103 Merritt Island, FL 32953

Suntrustbank/gs Loan 1797 NE Expressway Atlanta, GA 30329

Synchrony Bank/Amazon Attn: Bkc Dept PO Box 965064 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bkc Dept PO Box 965064 Orlando, FL 32896

Teachers Fed Credit Un 102 Motor Pkwy Hauppauge, NY 11788

Visa Dept Store Nat'l Bk Attn: Bkc Dept PO Box 8053 Mason, OH 45040 B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Middle District of Florida

In	Gregory Michael Meyer James Anthony Cannini		Case No	).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for serv	
	For legal services, I have agreed to accept		\$	900.00	<u> </u>
	Prior to the filing of this statement I have received		\$	335.00	<u> </u>
	Balance Due		\$	565.00	<u></u>
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	n unless they are me	mbers and associ	ates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				of my law firm. A
6.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	cts of the bankruptc	y case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credited</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on home</li> </ul>	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparatio	th may be required; and any adjourned be semption plannir	earings thereof; g; preparation	and filing of
7.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any disany other adversary proceeding.			nces, relief fror	n stay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an s bankruptcy proceeding.	ny agreement or arrangement fo	or payment to me for	r representation o	of the debtor(s) in
	October 14, 2016	/s/ Eric J. Enriqu	ie		
	Date	Eric J. Enrique			
		Signature of Attorn Enrique Law Fir			
		836 Executive L	n		
		Rockledge, FL 3 (321) 638-23009		192	
		E.Enrique@Enri			
		Name of law firm			